



RESPONSE TO NON-FINAL OFFICE ACTION

Certificate of Mailing under 37 CFR 1.8

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Commissioner for Patents
P.O. Box 1450
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Deposit Date: April 4, 2006

Appl. No.: 10/635,797, filed August 5, 2003

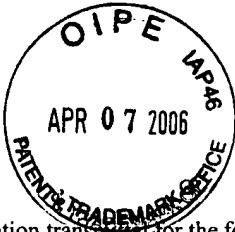
Docket No.: 10945.105002 NEURO101

Enclosures: Response to Non-Final Office Action (2 pgs.); Terminal Disclaimer (2 pgs.); Fee Transmittal (2 pgs.); Petition for Extension of Time Under 37 C.F.R. § 1.136 (1 pg.); Certificate of Mailing (1 pg.); Check in the amount of \$120.00; and Return Receipt Postcard.

A handwritten signature in black ink, appearing to read "Diane M. Guilfoy".

Diane M. Guilfoy

FEE TRANSMITTAL



Attorney Docket No. 10945.105002 (Neuro 101US)

This sheet accompanies a patent application transmittal for the following application:

App. No.: 10/635,797

Inventor(s): Jean Rapin, Hans Klaus Witzmann, Jean-Marie Grumel, Jacques Gonella

Filing Date: August 5, 2003

Title: Tripeptides and Tripeptide Derivatives for the Treatment of Neuro-Degenerative Diseases

The filing fee is calculated as shown below:

1. FILING FEE:

FOR:	SMALL ENTITY		LARGE ENTITY	
	FEE	FEES PAID	FEE	FEES PAID
<input type="checkbox"/> UTILITY FILING FEE	\$150		\$300	
<input type="checkbox"/> UTILITY SEARCH FEE	\$250		\$500	
<input type="checkbox"/> UTILITY EXAMINATION FEE	\$100		\$200	
<input type="checkbox"/> PROVISIONAL FILING FEE	\$100		\$200	
<input type="checkbox"/> DESIGN FILING FEE	\$100		\$200	
<input type="checkbox"/> DESIGN SEARCH FEE	\$50		\$100	
<input type="checkbox"/> DESIGN EXAMINATION FEE	\$65		\$130	
<input type="checkbox"/> REISSUE FILING FEE	\$150		\$300	
<input type="checkbox"/> REISSUE SEARCH FEE	\$250		\$500	
<input type="checkbox"/> REISSUE EXAMINATION FEE	\$300		\$600	
<input type="checkbox"/> APPLICATION SIZE FEE (If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).)	\$125		\$250	
SUBTOTAL (1)		\$xxx		\$xxx

2. CLAIMS:

		SMALL ENTITY		LARGE ENTITY	
FOR:	NO. FILED	NO. EXTRA	RATE	FEES	RATE
TOTAL CLAIMS	- 20 =	0	x 25 =		x 50 =
INDEP. CLAIMS	- 3 =	0	x 100 =		x 200 =
<input type="checkbox"/> MULTIPLE DEPENDENT CLAIM PRESENTED			+180 =		+360 =
SUBTOTAL (2)		\$xxx			\$xxx

3. ADDITIONAL FEES:

		SMALL ENTITY		LARGE ENTITY	
FOR:		FEE	FEES PAID	FEE	FEES PAID
<input type="checkbox"/> LATE FILING, FEE OR OATH		\$65		\$130	
<input type="checkbox"/> NON-ENGLISH SPECIFICATION		\$130		\$130	
<input type="checkbox"/> OTHER: Request for Continued Examination					
<input checked="" type="checkbox"/> OTHER 1 Month Extension of Time				120.00	120.00
SUBTOTAL (3)		\$xxx			\$120.00

FEE TRANSMITTAL

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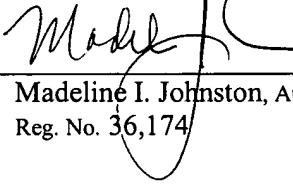
Attorney Docket No. 10945.105002 (Neuro 101US)

TOTAL FILING FEES: \$120.00

A check is enclosed for the total amount: **\$120.00**

The Commissioner is hereby authorized to charge any additional fees required under 37 CFR 1.16 or 1.17, or to credit any overpayment, to Deposit Account No. 11-0980. A duplicate of this document is enclosed.

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By: 
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Date: April 4, 2006